



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\***

CONFIRMATION NO. 9584

Bib Data Sheet

|                             |                                       |              |                        |  |
|-----------------------------|---------------------------------------|--------------|------------------------|--|
| SERIAL NUMBER<br>10/826,689 | FILING DATE<br>04/16/2004<br><br>RULE | CLASS<br>128 | GROUP ART UNIT<br>3743 | ATTORNEY<br>DOCKET NO.<br>VINTL.125CP1 |
|-----------------------------|---------------------------------------|--------------|------------------------|--|

## APPLICANTS

Steven F. Bierman, Del Mar, CA;

\*\* CONTINUING DATA *yes mp* \*\*\*\*\*

This application is a CIP of 10/270,883 10/11/2002 PAT 6,796,310  
 which claims benefit of 60/328,727 10/11/2001

\*\* FOREIGN APPLICATIONS *NONE mp* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 06/25/2004

|  |   |                         |                       |                            |
|--|---|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>CA               | SHEETS<br>DRAWING<br>12 | TOTAL<br>CLAIMS<br>16 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>allowance <i>mp</i> |   |                         |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature <i>[Signature]</i> | Initials <i>mp</i>      |                       |                            |

## ADDRESS

20995  
 KNOBBE MARTENS OLSON & BEAR LLP  
 2040 MAIN STREET  
 FOURTEENTH FLOOR  
 IRVINE , CA  
 92614

## TITLE

Endo-tracheal tube securement system

|                            |   |   |
|----------------------------|---|---|
| FILING FEE<br><br>RECEIVED | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |
|----------------------------|---|---|

|     |  |   |
|-----|--|---|
| 450 |  | <input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |
|-----|--|---|